## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 18 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Faith Family Freedom Fund	C C00489625
Check If 24-hour report 48-hour report New report Amends report filed or	01 28 2013
Full Name (Last, First, Middle Initial) of Payee Rev. Stephen Broden	Date
Mailing Address 1321 Rowan	10 29 2012 Amount
City State Zip Code	
Dallas TX 75223 Tra	308.79 ansaction ID : SE.9496
Purpose of Expenditure Travel expenses for bus tour  Category/ Type  Office S	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN Check	One: President Oppose
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	ement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Rev. Stephen Broden	Date 10 29 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Mailing Address 1321 Rowan	Amount
City State Zip Code	
Dallas TX 75223	308.80 ansaction ID : SE.9498
Purpose of Expenditure Travel expenses for bus tour  Category/ Type  Office S	Sought: House State: MO Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:  CLAIRE MCCASKILL  Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	ement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	617.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1 7 1 7 1 7 1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Paul Tripodi  [Electronically Filed] Date 01	/ 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	